

Virginia
DIOR
DEPARTMENT OF PROFESSIONAL AND OCCUPATIONAL REGULATION

20. C. If you answered "yes" to either question #20.A. or #20.B., list the felony and/or misdemeanor conviction(s). Attach your original criminal history record and any other information you wish to have considered with this application (i.e., information on the status of incarceration, parole or probation; reference letters; documentation of rehabilitation; etc.). If necessary, you may attach a separate sheet of paper.

Original criminal history records may be obtained by contacting the state police in the jurisdiction in which you were convicted. Virginia residents must complete a criminal history record request form in the presence of a notary public and mail it to the Department of State Police, Central Criminal Records Exchange, Post Office Box 27472, Midlothian, Virginia 23261-7472.

21. Perpetual Care Trust Fund Trustee _____
22. Perpetual Care Trustee's Address _____
City, State, Zip Code _____
23. Perpetual Care Trustee Contact Person _____
24. Contact Person's Title _____
25. Telephone & Facsimile Numbers () - () -
Telephone Facsimile
26. Is the Perpetual Care Trust Fund Trustee a Virginia trust company or trust subsidiary or a federally insured bank or savings institution doing business in the Commonwealth of Virginia?
Yes ☐
No ☐ If no, has the Virginia Cemetery Board previously approved the trustee?
Yes ☐ If yes, your company or the trustee must furnish the Board with proof that a fidelity bond with corporate surety thereon, payable to the trust established, has been secured and is in effect.
No ☐ If no, your company must submit a Trustee Approval Application to obtain approval from the Virginia Cemetery Board and the trustee must furnish to the Board a fidelity bond with corporate surety thereon, payable to the trust established, which shall be designated "Perpetual Care Trust Fund for (name of cemetery company)", in a sum equal to but not less than 100% of the value of the principal of the trust estate at the beginning of each calendar year.
27. Preneed Trust Account Trustee _____
28. Preneed Trustee's Address _____
City, State, Zip Code _____
29. Preneed Trustee Contact Person _____
30. Contact Person's Title _____
31. Telephone & Facsimile Numbers () - () -
Telephone Facsimile
32. Is the Preneed Trust Account Trustee a Virginia trust company or trust subsidiary or a federally insured bank or savings institution doing business in the Commonwealth of Virginia?
Yes ☐
No ☐ If no, has the Virginia Cemetery Board previously approved the trustee?
Yes ☐ If yes, your company or the trustee must furnish the Board with proof that a fidelity bond with corporate surety thereon, payable to the trust established, has been secured and is in effect.
No ☐ If no, your company must submit a Trustee Approval Application to obtain trustee approval from the Virginia Cemetery Board and the trustee must furnish the Virginia Cemetery Board a fidelity bond with corporate surety thereon, payable to the trust established, which shall be designated "Preneed Trust Account for (name of cemetery company)," in a sum equal to but not less than 100 percent of the value of the principal of the trust estate at the beginning of each calendar year.

33. Has your company recovered all of its original perpetual care trust fund deposits under § 54.1-2321 of the *Code of Virginia*?

Yes ☐

No ☐ If no, enter the amount of the trust that has not yet been recovered. _____

34. I, the undersigned, certify that the foregoing statements and answers are true, and I have not suppressed any information that might affect the Board's decision to approve this application. I will notify the Department if the company, company officers or directors, or compliance agent is subject to any disciplinary action or convicted of any felony or misdemeanor charges (in any jurisdiction) prior to receiving the requested license. I also certify that I understand, and have complied with, all the laws of Virginia related to cemetery company licensure under the provisions of Title 54.1, Chapter 23.1 of the *Code of Virginia* and the *Virginia Cemetery Board Regulations*.

Signature of Officer, Director or Compliance Agent

Date

Σ State law requires every applicant for a license, certificate, registration, or other authorization to engage in a business, trade, profession or occupation issued by the Commonwealth to provide a social security number or a control number issued by the Virginia Department of Motor Vehicles.

**APPLICATIONS AND SIGNATURES MUST BE ORIGINAL. FASCIMILE TRANSMISSIONS
AND COPIES WILL NOT BE ACCEPTED.**